

Department of Health

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MEMORANDUM

TO: School Nurses/Administrators

FROM: Mike Leyden, Division of Emergency Preparedness, Response

And Injury Prevention DATE: November 2015

RE: Options for accessing naloxone suitable for school access/use

In 2013, the Vermont Legislature passed Act 75, which allows health care professionals acting in good faith to prescribe, dispense, and distribute an opioid antagonist to a person at risk of experiencing an opioid overdose or to a family member, friend, or other person in a position to help such a person, so long as the recipient of the opioid antagonist has completed a prevention and treatment training program approved by the Department of Health (see VDH website for information and training resources). Similarly, *a person* who has received an opioid antagonist (naloxone kit) is free from civil or criminal liability for administering it to a person who he or she believes is experiencing an opioid-related overdose so long as the person is not acting recklessly, with gross negligence or intentional misconduct. If medical assistance (via 911) has not yet been sought, a person shall call emergency services after administering an opioid antagonist (naloxone).

Implications for schools and school health personnel are to first ensure that the school community has adequate substance abuse prevention resources. Next, schools/districts and communities should evaluate their potential need for keeping the rescue drug naloxone on hand and identify persons suitable for training who can use naloxone on others. Those persons should then be trained in conjunction with procurement of naloxone in accordance with the guidance below.

Additional details and resources about overdose prevention and naloxone can be found at http://healthvermont.gov/adap/treatment/naloxone/index.aspx

There are two recommended routes/methods of administration for naloxone hydrochloride, the first-line opioid antagonist of choice.

- Intranasal administration via use of pre-filled syringe with mucosal atomizer device
- Intramuscular injection via use of an auto-injector device.

Intranasal Route:

The Department of Health does not endorse any one manufacturer, however, the only currently available formulation of naloxone in a prefilled syringe acceptable for intranasal use is the



Naloxone HCL Inj., USP (1mg/mL) Luer-Jet Prefilled Syringe (NDC#76329-3369-1) manufactured by Amphastar. It is distributed via many vendors including some small/local pharmacies and retail chains.

The nasal atomizer device (packaged and sold separately) will need to be attached to this syringe in order to administer the medication via the intranasal route. (Currently, there is a single manufacturer: **Teleflex MAD300/LMA® MAD NasalTM Intranasal Mucosal Atomization Device w/o Syringe**; these items do not yet have a <u>National Drug Code(NDC #)</u>. These devices are available through numerous medical device/supply vendors.

Naloxone HCI INJ., USP





Intramuscular Route via auto-injector:

The Department of Health does not endorse any one manufacturer, however, the only currently available formulation of naloxone in a prefilled auto-injector acceptable for intramuscular use is the EVZIO[®] (naloxone HCl injection) 0.4 mg auto-injector (NDC# 60842-030-0) manufactured by Kaléo The company has several distribution partners and a product donation program for qualified entities/organizations. See full details on their website: http://www.evzio.com/hcp/index.php and http://www.evzio.com/hcp/index.php and http://www.kaleopharma.com/who-we-are/kaleo-cares/.



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